

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	bx	40891	10/13
O.I.P.E. CLASSIFIER		8	10-18-99
FORMALITY REVIEW	CT	109916	10/25/99

INDEX OF CLAIMS

✓ Rejected N Non-elected
 " " Allowed I Interference
 (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	10-10-01
2	✓	✓	10-13-03
3	✓	✓	1-14-04
4	✓	✓	4-13-04
5	✓	✓	
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If more than 150 claims or 10 actions
 staple additional sheet here

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